



CITY OF BRUNSWICK

1 W. Potomac Street • Brunswick, Maryland 21716 • (301) 834-7500

BOARD OF APPEALS Variance Application

Application Date: _____ Date of Next BOA Hearing: _____ Docket No.: _____

Name of Property Owner: _____

Name of Applicant: _____

Applicant's present legal interest in property:

_____ Owner

_____ Contract Purchaser

_____ Lessee

_____ Contract Lessee

_____ Other _____

Subdivision: _____ Date: _____

Location of Property: _____

N S E W Side of Road, N S E W Side of Nearest Intersecting Road)

Property Address: _____

Tax Map No.: _____ Parcel No.: _____ Lot No.: _____

Dimensions of Lot: _____ Total Sq. Footage: _____

Zoning District: _____

Ordinance Section and Subsection (if any) containing the requirements from which the variance is being requested: _____

Specific requirement(s) from which the variance is being requested: _____

Nature and extent of requested variance: _____

Description of proposed special exception use: _____

Previous BOA Case Number (if applicable): _____

I hereby affirm that all of the statements and information contained herein or filed with this appeal is true and correct.

Signature of Applicant: _____

Address of Applicant: _____

Phone Number: (H) _____ (W) _____

Sworn to and subscribed before me this _____ day of _____, 20_____

My commission expires: _____ Signature: _____

Notary Public